<u>Indiana State Police Methamphetamine Laboratory Occurrence Report</u> This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>06/29/2010</u>	Address:	SR 62 @ SR 61
Case #:	<u>35-30689</u>		Boonville, In
County:	<u>Warrick</u>		
Type of Laboratory Seizure (check one) ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (o Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Red Phosphorous/Iodine Reaction(s): Flammable Solvents: truck bed Water Reactive Metal (Lithium): Anhydrous Ammonia: Hydrochloric Acid Gas Generator(s): truck bed Corrosive Acid: truck bed Corrosive Base: truck bed Other (item and location):			
Child under age 18 discovered (check one) Investigative Information ☐ Yes (number present) ☐ Ephedrine/Pseudoephedrine Tracking Log ☑ No ☐ Retail/Merchant Tip *If yes, fax report to Child Protective Services ☑ Other: traffic stop This report is to be faxed to the following agencies that serve the location: Fire Department: Boonville Health Department: Warrick County Fax: 812-897-6104 Fax: 812-897-6104 Fax: N/A			
	ection Service: N/A information regarding this methamph		ontact
Investigating Officer: <u>Doug Humphrey</u> Phone <u>812-867-2079</u>			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.
- This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.